Form 13A – Complaint

Rule 13.02(1)

COMPLAINT

IN THE MAGISTRATES' COURT

OF VICTORIA AT MELBOURNE
INDUSTRIAL DIVISION

BETWEEN

(full name)

OF

(address)

and

(full name)

OF

(address of defendant)

TO THE DEFENDANT

TAKE NOTICE that this COMPLAINT has been brought against you on the basis set out in the pages attached.

If you intend to defend this complaint you must complete a response within 14 days after service on you of this complaint and give it to —

(a) the plaintiff whose address for service is set out in this Form;

AND

(b) the Registrar of the Magistrates' Court of Victoria at Melbourne.

You should have received a blank copy of the response when served with this complaint.

If you have a claim against the plaintiff, you may counterclaim against the plaintiff in the proceeding with leave of the Court. If you intend to counterclaim you must give notice of intention to counterclaim in the response form.

If you submit a response the Court will write to you and tell you the date you need to attend a pre-hearing conference.

IF YOU WANT TO DEFEND THE COMPLAINT but fail to submit a response within 14 days after service on you of the complaint the plaintiff may be able to obtain an order against you for the amount claimed together with costs without further notice to you.

PLAINTIFF DETAILS

Name:		
Date of Birth:	(only provide date of bir	th if under 21 years of age)
Address:		
Address for se	ervice of court documents:	(if different from above)
Phone:	(telephone during business he	ours)
Mobile:		
Email address	S:	
If the plaintiff i	is an organisation:	
Name:		
Trading as:		
ABN: (if an ind	dividual business):	
ACN: (if a con	npany):	
Address:		
Phone: (<i>telepi</i>	hone during business hours):	
Email address	3:	
	PLAINTIFF REPRESE	NTATIVE DETAILS
Are you repre	sented? (if not, go to the next s	section)
Who is repres	enting you?	
Union	☐ Australian lawyer	☐ Other
Name of repre	esentative:	
Representativ	e contact person details:	
Name:		
Address:		
Phone:	(telephone during business he	ours)
Mobile:		
Email address	S	

DEFENDANT DETAILS

acities. Please provide
☐ Company
t is an individual business)
t is a company)
company's registered office
AILS
Γ
n 🗌 Seasonal
able below
rovide average or range)

Day	Start time		Finish time	
Monday		am/pm		am/pm
Tuesday		am/pm		am/pm
Wednesday		am/pm		am/pm
Thursday		am/pm		am/pm
Friday		am/pm		am/pm
Saturday		am/pm		am/pm
Sunday		am/pm		am/pm

What is your applicable Modern Award or Enterprise Agre	ement?
What is your classification level under the applicable Mod-Agreement?	ern Award or Enterprise
Do you have a written contract of employment?	
☐ Yes ☐ No	
COMPLAINT TYPE	
The claim is made because the defendant has breached (applies):	select each one that
Claims under the Fair Work Act 2009 of the Commonw	vealth
A term of a modern award (specify name of award	ard)
☐ A term of an Enterprise Agreement (or transitional agree (specify name of agreement)	eement)
☐ A term of the National Employment Standards (specify the relevant terms
☐ A term of an order of the Fair Work Commission <i>order</i>)	(specify the term of the
☐ The Fair Work Act 2009 of the Commonwealth	(specify relevant section)
☐ The Fair Work Regulations 2009 of the Commonwealth regulation)	h (specify relevant
Claims under Victorian legislation etc.	
☐ The Long Service Leave Act 2018	
☐ The Occupational Health and Safety Act 2004	
☐ The Outworkers (Improved Protection) Act 2003	
☐ The Public Holidays Act 1993	
☐ The Workplace Injury Rehabilitation and Compensation	ation Act 2013
☐ Contract of employment	
Other (specify)	
BREACHES	
Please indicate which of the following are applicable and to claiming (select each one that applies):	the amounts you are
☐ Failure to pay wages:	\$
☐ Failure to pay commission:	\$
Failure to pay entitlements (e.g., sick leave, annual lea	ave or carers leave):\$

☐ Failure to pay penalty rates:	\$
Failure to pay allowances:	\$
☐ Failure to comply with National Employment Standards (NES):	\$
Failure to give notice of termination of employment:	\$
Unauthorised deduction from wages:	\$
☐ Other (<i>specify</i>)	\$
Total of all breaches:	\$
NATURE OF BREACHES	
Briefly describe each breach you have selected above. Be clear and incluinformation to enable the defendant to understand the claim. If claiming must include details of each amount claimed (attach further sheets if you more space).	noney, you
ORDERS SOUGHT	
The plaintiff seeks orders that the defendant do either or both of the follow	ving:
Pay monies in the sum of the breaches claimed: \$ [insert amour	nt]
☐ Impose a penalty (this is for claims under section 546 of the Fair Work of the Commonwealth but is not available if the small claims procedure un 548 of that Act is elected) ☐ Yes ☐ No	
Do something else (please specify).	
SMALL CLAIMS PROCEDURE	
If your complaint is brought under the Fair Work Act 2009 of the Common can elect to have your matter heard as a small claim and simplified proceduply. The small claims procedure applies for claims of \$100,000 or less.	
I elect to have this matter heard as a small claim under section 548 of the Act 2009 of the Commonwealth.	Fair Work
☐ Yes ☐ No	
The small claims procedure does not allow a party to be represented by a practitioner unless the court grants permission.	ı legal
Do you intend to seek to be represented?	
☐ Yes ☐ No	
If you intend to seek leave to be represented, please provide the represented details in the "Plaintiff Representative Details" section above.	ntative

Signed by the plaintiff or plaintiff's representative
Name:
Date: